

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | BA       | 70385  |          |
| O.I.P.E. CLASSIFIER       | BA       | 8      | 12-20-99 |
| FORMALITY REVIEW          | KK       | 70029  | 1-4-00   |
| RESPONSE FORMALITY REVIEW |          |        |          |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1     | ✓     | 8702     | 1503 |
| 2     | ✓     | 1503     | 803  |
| 3     | ✓     | 1503     | 803  |
| 4     | ✓     | 1503     | 803  |
| 5     | ✓     | 1503     | 803  |
| 6     | ✓     | 1503     | 803  |
| 7     | ✓     | 1503     | 803  |
| 8     | ✓     | 1503     | 803  |
| 9     | ✓     | 1503     | 803  |
| 10    | ✓     | 1503     | 803  |
| 11    | ✓     | 1503     | 803  |
| 12    | ✓     | 1503     | 803  |
| 13    | ✓     | 1503     | 803  |
| 14    | ✓     | 1503     | 803  |
| 15    | ✓     | 1503     | 803  |
| 16    | ✓     | 1503     | 803  |
| 17    | ✓     | 1503     | 803  |
| 18    | ✓     | 1503     | 803  |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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 (Rev. 6/99)